PTC/SB/17 (07-08)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				A II AI AI A	0/559,20					
FEE TRANSMITTAL										
For FY 2006							per 2, 2005			
FOF F 1 2006				<u> </u>			l Paganon			
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name	TBA					
TOTAL AMOUNT OF PAYMENT (\$) 65.00				Art Unit 3677						
TOTAL AMOUNT OF PAYMEN	Attorney Docket N	ey Docket No. 148821.00001								
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 50-1429 Deposit Account Name: Powell Goldstein LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
FILING FEES SEARCH FEES EXAMINA							TION FEES			
Application Type Fo	- 46		ee (\$)	Small Entity Fee (\$)	Fee (Small Fee		Fee	Paid (\$)	
			500	250	200	10				
Design 2	200 10	00 1	100	50	130	6	5			
_		-	300	150	160	8	-			
Reissue 3	300 1:	50 5	500	250	600	30	=			
Provisional 2	200 10	00	0	0	0		0			
2. EXCESS CLAIM FEES							Small Entity			
Fee Description Feeb plains over 20 (including Briganes)							Fee (\$) Fee (\$) 50 25			
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							200	100		
Multiple dependent claims							360	180		
				e Paid (\$)			Multiple Dependent Claims			
20 or HP = x =							ee (\$)	Paid (\$)		
HP = highest number of total clair Indep. Claims Ext	ms paid for, if (tra Claims	greater than 20.	Fee	Paid (\$)		-				
HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR						small en	itity) for ea	ach add	litional 50	
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = /50 = (round up to a whole number) x										
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									Fees Paid (\$)	
Other (e.g., late filing su	Other (e.g., late filing surcharge): Late Filing Surcharge 65.00									
SUBMITTED BY		//								
Signature	Ma.	such .] [Registration No. 31	1.236		Telephone	Telephone 404-572-6900		
Name (Print/Type) Jason A. Bernstein							Date 2-8-07			

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this bunden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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